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PUBLIC REFERENCE COPY

June 30, 2016

VIA ECFS

Marlene H. Dortch Secretary Federal Communications Commission 445 12th Street, S.W., Room TW-A306 Washington, DC 20554

Re: FCC Form 481 – Carrier Annual Report for Program Year 2016 WC Docket No. 10-90

Dear Secretary Dortch:

On behalf of Smith Bagley, Inc. ("SBI"), SAC 459001, please find attached a redacted public version of Smith Bagley's FCC Form 481 Carrier Annual Report, filed pursuant to Sections 54.313 and 54.422 of the Commission's Rules (Report"). The Report has been submitted to the Universal Service Administrative Company. SBI's Report has also been filed with the state commission and delivered to Tribal governments as applicable. The attached Report has been marked "REDACTED – FOR PUBLIC INSPECTION."

Smith Bagley, Inc. is also submitting to the Commission, under separate cover, a confidential version of the Report. The confidential version is marked "CONFIDENTIAL – NOT FOR PUBLIC INSPECTION."

Please contact Steven M. Chernoff, Esq., at 703-584-8670 if any questions arise concerning the above-referenced enclosures or if you require any additional information.

Sincerely,

David A. LaFuria

Steven M. Chernoff

Contilier

Attorneys for: *Smith Bagley, Inc.*

Attachment

FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001	
<015>	Study Area Name	SMITH BAGLEY, INC CL	
<020>	Program Year	2017	
<030>	Contact Name: Person USAC should contact with questions about this data	Anita Garrison	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	9285370690 ext.2506	
<039>	Contact Email Address: Email of the person identified in data line <030>	agarrison@cellularoneaz.com	
	Form Type	54.313 and 54.422	

ata Cu	Data Collection Form	Catana Segue 0305 of Latina SMO
		UMB LONITOI NO. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001
<015>	Study Area Name	SMITH BAGLEY, INC CL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Anita Garrison
<035>	Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext,2506
<039>	Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularoneaz.com
<110>	Has your company received its ETC certification from the FCC?	(ves / no)
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	O O (ou/sa/)
	If your answer to Line <111> is yes, please file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.	
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.	company is a
	Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document re-year be
<113>	Maps detailing progress towards meeting plan targets	
<114>	Report how much universal service (USF) support was received	and the second s
4116 4117 4118	How much (USF) was used to improve service quality and how support was used to improve service quality. How much (USF) was used to improve service coverage and how support was used to improve service coverage. How much (USF) was used to improve service capacity and how support was used to improve service capacity. Provide an explanation of network improvement targets not met. In the prior calendar was	ove service quality prove service coverage orove service capacity

								NO Vini	OMB Control No. 3060- July 2013	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	o. 3060-0819
<010> Study Area Code	a Code				459001						
<015> Study Area Name	a Name				SMITH BAGLEY,	Y, INC CL					
<020> Program Year	Year				2017						
<030> Contact N	Contact Name - Person USAC should contact regarding this data	Should contac	t regarding thi	s data	Anita Garrison	nosı					
<035> Contact Te	Contact Telephone Number - Number of person identified in data	- Number of pe	rson identified	in data line <030>	30> 9285370690 ext,2506	ext,2506					
<039> Contact Er	Contact Email Address - Email Address of person identified in data line <030>	il Address of pe	erson identified	in data line <	П	agarrison@cellularoneaz.com					
<210> For the p	For the prior calendar year, were there any reportable voice service outages?	ar, were there	any reportal	ble voice serv	rice outages?	Yes			Ĭ		
<220> <a>	<	<	<b3></b3>	 	<01>	<0.5	ф >	\e	\$	9	Ŷ
NORS Reference Number	8	Outage Start Outage Start Date Time	Outage End Date	Outage End Time	Number of Customers Affected	P	911 Facilities Affected	Service Outage Description (Check	Did This Outage Affect Multiple Study Areas	Service Outage	Preventative
						Customers	(Ves / No)	all that apply)	(Yes / No)	Resolution	Procedures
						See attached					
					CAN	Workehoot					
					8	- 10011641					

(300) Uni	(300) Unfulfilled Service Request	FCC Form 48.1
Data Coll	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	<010> Study Area Code	459001
<015>	<015> Study Area Name	SMITH BAGLEY, INC CL
<020>	<020> Program Year	2017
<030>	<030> Contact Name - Person USAC should contact regarding this data	Anita Garrison
<035>	<035> Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext.2506
<039>	<039> Contact Email Address - Email Address of person identified in data line <030>	agarriaonacellularoneaz.com
<300> U	<300> Unfulfilled service request (voice)	0
<310>[<310> Detail on attempts (voice)	
	Nam	Name of Attached Document
<320>	<320> Unfulfilled service request (broadband)	
<330>	<330> Detail on attempts (broadband)	
		Name of Attached Document

(400) Number of Complaints per 1,000 customers	FCC Form 4B1
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 459001
<015>	Study Area Name MATERY, INC CL.
<020>	Program Year 2017
<030>	Contact Name - Person USAC should contact regarding this data
<035>	Contact Telephone Number - Number of person identified in data line <030> 9285379699.083.2596
<039>	Contact Email Address - Email Address of person identified in data line «030>
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice
<420>	Complaints per 1000 customers for mobile voice 0 . 0
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband
<450>	Complaints per 1000 customers for mobile broadband

	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001	
<015>	Study Area Name	SMITH BAGLEY, INC CL	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Anita Garriago	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext.2506	
<039>	Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularoneaz.com	
<500>	Certify compliance with applicable service quality standards and consumer pro-	tection rules Yes	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	499001nm510 pdf es Compliance	

Data Co	ollection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459003	
<015>	Study Area Name	SNITH BAGLEY, INC CL.	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Anita Garrison	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext.2506	
<039>	Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularoneaz_com	
<600>	Certify compliance regarding ability to function in emergency situations	Yes	
<610>	Descriptive document for Functionality in Emergency Situations	459002az610.pdf	"

(600) Functionality in Emergency Situations

 <010> \$Study A <020> Program <030> Contac <035> Contac <035> Contac <035> Contac <035> <035> <036 <037 <039 <039 	Study Area Code Study Area Name Program Year Contact Name - Pr Contact Email Add Sidential Local Servi ngle State-wide Resi state	Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding t Contact Telephone Number - Number of person identific Contact Email Address - Email Address of person identific Contact Email Address - Email Address of person identific Single State-wide Residential Local Service Charge state State Exchange (ILEC) SAC (CETC) Rate Type			459001				
	iy Area Name Year tact Name - I tact Name - I tact Telepho tact Email Ac ntial Local Sen State-wide Res state - Exc ente Res Exc	Person USAC s ne Number - N ddress - Email J vice Charge Effer sidential Local Se ca2>							
	riam Year Lact Name - I Lact Telepho Lact Email Ac Intial Local Sen State-wide Res Als Als Are Box	Person USAC sine Number - Numb			SMITH BAGLEY,	LEY, INC CL			
	tact Name - I tact Telephoo tact Email Ac mial Local Sen State-wide Res ate Exc	Person USAC sine Number - Nadress - Email / Adress - Email / Adress e Effect sidential Local Secaphange (ILEC)			2017				
	tact Telephoi tact Email Ac tact Telephoi	ne Number - N Jdress - Email / vice Charge Effec sidential Local Se <a2></a2>	hould contact	Contact Name - Person USAC should contact regarding this data	ata Anita Garrison				
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	tact Email Ac nital Local Servide Res State-wide Res etc.	dress - Email / vice Charge Effectidential Local Seca2>	lumber of per	Contact Telephone Number - Number of person identified in data line <030>	data line <030>	9285370690 ext,2506			
	ntial Local Sen State-wide Res afe Exc	vice Charge Effec	Address of pe	rson identified in	ed in data line <030>	agarrison@cellularoneaz.com	що		
		change (ILEC)	ctive Date		1/1/2016	4		. 9	
Stat		:hange (ILEC)	<93>	<01>	<p5></p5>	 	 	<	9
					S S S S S S S S S S S S S S S S S S S	See attached worksheet		יינו אורב רוופו פצב	integral bettime water and received

(710) Brd Data Col	(710) Broadbrand Price Offerings Data Collection Form						FCC Form 481 OMB Control N July 2013	1481 rol No. 3060-0986	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		45	459001					
<015>	1 1			SMITH BAGLEY, INC.	: - CL	+			
<020>	Program Year								
<030>		Contact Name - Person USAC should contact regarding this data	this data	Anita Garrison					
<035>		Contact Telephone Number - Number of person identified in data line <030>	ied in data line <030>	9285370690 ext,2506	2506				
<039>		Contact Email Address - Email Address of person identified in data line <030>	ied in data line <030>	agarrison@cellularoneaz,com	laroneaz,com				
<711>	<91>	<a2></a2>	<+14>	<	٥	<d1></d1>	<d2></d2>	¢83>	<d4>></d4>
	State	Exchange (/LEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mhns)	Broadband Service -	Usage Allowance	Usage Allowance Action Taken When
						(cda)	friday in the state of the stat		Final Page 13

Settit Bodie contact regarding this data Number - Number of person identified in data line 4030> Settit Bodievy, the Settit Bodievy, the Settit Bodievy, the See attached worksheet	(1900) Onemarking Community		
The second secon	(out) Operating Companies		CAMP C
Study Area Code Study Area Manuer and Manuer and Study Area Manuer and Manue			UMB Control No. subu-usks/UMB Control No. subu-usiy
Study Area Code Study Area Name Study Area Name Study Area Name Program Vere Name Program Vere Name Contact Name - Person USAC Should contact regarding this data Contact Name - Person USAC Should contact regarding this data Contact Name - Person USAC Should contact regarding this data Contact Name - Person USAC Should contact name of Study Contact Name - Person USAC Should contact Name of Study Contact Name - Person USAC Should contact Name of Study Contact Name - Person USAC Should contact Name of Study Contact Name - Person USAC Should contact Name of Study Contact Name - Person USAC Should contact Name of Study Contact Name - Person USAC Should not search to the Contact Name of Study Contact Name - Person USAC Should not search to the Contact Name of Study Contact Name - Person USAC Should not search to the Contact Name of Study Affiliates Affiliates			
Study Area Name Study Area Name Contact Name Person USAC Should contact regarding this data Contact Telephone Number of person identified in data line G030> Reporting Carrier Sector Beagley, Tinc. Operating Company Sector Beagley, Tinc. Affiliates Affiliates See attached worksheet	Study Area Code	11	
Program Vear Contact Name - Person USAC should contact regarding this data Contact Telephone Number of person identified in data line <030> Sassayotes ext. 25 of Contact trail Address of person identified in data line <030> Sassayotes ext. 25 of Sassayotes ext. 25	Study Area Name		
Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line - G030> Passa70690 ext. 2506 Contact Telephone Number - Number of person identified in data line - G030> Passa70690 ext. 2506 Reporting Carrier Smith Baglay, Inc. Affiliates Affiliates See attached worksheet	Program Year		
Contact Telephone Number - Number of person identified in data line 4030> 3938370690 ext.1506 Contact Email Address of person identified in data line 4030> 393871606013133coneaz.com Reporting Campany Smith Baglary, Inc. Operating Company Smith Baglary, Inc. Affiliates See attached worksheet	Contact Name - Person USAC should contact regarding this data	Garrison	
Reporting Carrier Reporting Carrier Reporting Company Smith Baglay, Inc Holding Company Smith Baglay, Inc Affiliates See attrached worksheet	Contact Telephone Number - Number of person identified in data line <030>	170690 ext, 2506	
Neporting Campany Smith Bagjary, Inc. Operating Company Smith Bagjary, Inc. Affiliates SAC Affiliates See attrached worksheet	Contact Email Address - Email Address of person identified in data line <030>	ison@cellularoneaz.com	
Holding Company Smith Bagley, Jinc. Calb Affiliates Affiliates See affached worksheet	Reporting Carrier		
Operating Company Smith Bassley, Inc Affiliates Affiliates See attached worksheet	Holding Company		
Affiliates sac Affiliates See attrached worksheet	Operating Company		
Affiliates sAC Affiliates See attached worksheet			
See attached worksheet		<a>>	<83>
See attached worksheet	Affiliates	SAC	Doing Business As Company or Brand Designation
See attached worksheet			
See attached worksheet			
See attached worksheet			
See attached worksheet		104	
		e attached worksh	;et

(900) Tri	(900) Tribal Lands Reporting	FCC Form 48.1
Data Co	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001
<015>		SMITH BAGIEY, INC CL
<020>		2017
<030>		Anita Garrison
<035>	1	9285370690 ext,2506
<039>	Contact Email Address - Email Address of person identified in data	agarrison@cellularoneaz,com
<006>	Does the filing entity offer tribal land services? (Y/N)	Yes
<910>	Tribal Land(s) on which ETC Serves	Zuni Pueblo, Navajo Nation, Hopi Tribe, and White Mountain Apache
		45900laz5220.pdf
<920>	Tribal Government Engagement Obligation	
		Name of Attached Document
your c	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the chains described on the standard documents on line 000	
emons	to confirm the status described on the attached occurrently), on the 520, demonstrates coordination with the Tribal government pursuant to	Select
54.31	§ 54.313(a)(9) includes:	Yes or No or Not Applicable
<921>	Needs assessment and deployment planning with a focus on Tribal	Yes
	community anchor institutions.	
<922>	Feasibility and sustainability planning;	Yes
<923>	Marketing services in a culturally sensitive manner;	Y 0.5
<925>	Compliance with Land Use permitting requirements	e ve
<976>	Compliance with Facilities Siting rules	N S S
<927>	Compliance with Environmental Review processes	Yes
<928>	Compliance with Cultural Preservation review processes	X e ss
<626>	Compliance with Tribal Business and Licensing requirements	Yes

		Page 12
1000) V ata Col	(1000) Voice and Broadband Service Rate Comparability Data Collection Form	FCC Form 48.1 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001
<015>	Study Area Name	SMITH BAGLEY, INC CL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Anita Garrison
<035>	Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext.2506
¢039 √039	Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularoneaz.com
<1010>	n for voice services rate	499001nm1010.pdf
	comparability compliance	Name of Attached Document
<1020>	Broadband comparability certification	
<1030>	Attach detailed description for broadband comparability compliance	
		Name of Attached Document

	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001
<015>	Study Area Name	SMITH BAGLEY, INC CL
<020>	Program Year	
<030>	Contact Name - Person USAC should contact regarding this data	Anita Garrison
<032>		9285370690 ext, 2506
<039>	П	agarrison@cellularoneaz.com
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	V € S
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).	kbps

	Data Collection Form		July 2013
1111	Study Area Code	459001	
111	Study Area Name	SMITTH BAGIES INC	Ė
1 1	Program Year		
l	Contact Name - Person USAC should contact regarding this data	Anita Garrison	
<032>	Contact Telephone Number - Number of person identified in data line <030>		
<039>	Contact Email Address - Email Address of person identified in data line <030>	e <030> agarrison@cellularoneaz.com	eaz,com
		499001nm1200,doc	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		
	a a		Name of Attached Document
<1220>	Link to Public Website	HTTP http://www.cellularoneonline.com/	line.com/
"Please check the or the website list \$54.422(a)(2) annually report:	"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	10,	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,		
<1222>	Details on the number of minutes provided as part of the plan,		
<1223> /	Additional charges for toll calls, and rates for each such plan.		

(2000) Price C	(2000) Price Cap Carrier Additional Documentation		FCC Form 481	
Data Collection Form Including Rate-of-Reti	Data Collection Form Including Rate-of-Return Carriers offiliated with Price Cap Local Exchange Carriers		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	90-0819
<010> Stud	Study Area Code	459001		
1	Study Area Name	SMITH BAGLEY, INC CL		14.
ΙI	Program Year	2017		
- 1	Contact Name - Person USAC should contact regarding this data	Anita Garrison		
<039> Con	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularoneaz.com	com	
Select the a and Connec	appropriate responses below (Yes, No, Not Applicable) to note ct America Phase II support as set forth in 47 CFR § 54.313(b),(compliance as a recipier (c),(d),(e). The informatic	Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.	eductions,
Inc	Incremental Connect America Phase I reporting			
<2010>	2nd Year Certification 47 CFR § $54.313(b)(1)(i)$ - Note that for the July 1 2016 certification, this applies to Round 2 recipients of Incremental	I)(i) - Note that for the July 1 recipients of Incremental		
	Support			
<2011>	srd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note that for the July 1 2016 certification, this applies to Round 1 recipients of Incremental Surport	that for the July 1 of Incremental		
6	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
<2022>	Recipient certifies, representing year two after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mars (1Mbros, 54, 313(h)(2)(i) Round 2 recipients only	a notice of locations in and Initiatives Program for t least 4		
<2023>		therits only. tement of the total amount of sar in meeting Connect companied by a list of census This covers year two -		
<2024A>	54.313(b)(2)(ii). Round 2 recipients Only. Round 2 Recipient of Incremental Support?			
<2024B>	Attach list of census blocks indicating where funding was spent in year two - 54.313(b)(2)(ii). Round 2 recipients only.	was spent in year	Name of Attached Document Listing Required Information	
<2025A>	Round 1 or Round 2 Recipient of Incremental Support?	Ç:		
<20258>	Attach geocoded Information for Phase I milestone reports (Round 1 for year three and Round 2 for year two) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-	ports (Round 1 for ica Fund , WC	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)	} 54.313(c)(4)		

(2000) Price Cap Carri Data Collection Form Including Rote-of-Retu	(2000) Price Cap Carrier Additional Documentation (Continued) Data Collection Form Including Rate-of-Return Carriers offiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
Price <2016> Connect	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} 116> Certification support used to build broadband Connect America Phase II Reporting {47 CFR § 54.313(e)}	
<2017A>	Connect America Fund Phase II recipient?	
<2017B>	Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price	Name of Attached Document Listing Required Information
<2018>	cap carrier used for capital expenditures in 2015. Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)	Name of Attached Document Listing Required Information
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in under the carrier is reasonably comparable to rates charged to eligible schools and libraries in	
<2020>	urbain aleas for comparable offerings = 34.513(e)(z)/y) Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54,313(e)(3)	
<2021>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)	
<2026>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)	
<202>>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)	

(3005) Rate Data Collect	Of Return Carrier Additional Documentation Ion Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		459001		
<015>	Study Area Name			AGLEY, I	NC CL
<020>	Program Year	1.6.	2017		
<030>	Contact Name - Person USAC should contact regarding this o		Anita G	arrison	
<035>	Contact Telephone Number - Number of person identified in	data line <030>		90 ext.25	,
<039>	Contact Email Address - Email Address of person identified in	n data line <030>	agarris	on@cellu	laroneaz.com
compliand	the items below to note compliance with five year see with the financial reporting requirements set fort nents attached below is accurate.				
(3009)	Progress Report on 5 Year Plan Carrier certifies to 54,313(f)(1)(iii)				
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}				
(3010B)	Please Provide Attachment	Name of Attach	ned Document Li	sting Required	
(3012A)	Community Anchor Institutions {47 CFR § 54,313{f}(1)(ii)}				
(3012B)	Please Provide Attachment		ned Document Li	sting Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54,313(f)(2)}	Information (Yes/No)	0	0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	0	0	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54,313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) Document(s) with Balance Sheet, Income Statement		[
(3017)	and Statement of Cash Flows If the response is yes on line 3014, attach your company's RUS annual report and all required	Name of Attach	ned Document Li	sting Required	
(3018)	documentation If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the	(Yes/N	No)	0	
(3019)	boxes below to confirm your submission on line 3026 pursuant to § 54,313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement				
(3021)	and Statement of Cash Flows Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.				
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for				
(3023)	Telecommunications Borrowers Underlying information subjected to a review by an independent certified public accountant				ę.
(3024)	Underlying information subjected to an officer certification.				
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
(3026)	Attach the worksheet listing required information	Name of Attach	ned Document Li	sting Required	

(3005) Rate	(3005) Rate Of Return Carrier Additional Documentation (Continuet)	165 ps; #345 ps;
Data Collection Form	tion Form	CMB Custrol No. 20ch (PRI) Control No. 30ch (PRI)
		July 2013.
5	entity Area Code	45ann1
	200	4000
<015> 5	<015> Study Area Name	SMITH BAGLEY, INC CL
<020> P	<020> Program Year	2017
<030> C	<030> Contact Name - Person USAC should contact regarding this data	Anita Garrison
<035> C	<035> Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext,2506
<039> C	<039> Contact Email Address - Email Address of person identified in data line <030> agarrison@cellularoneaz.com	adarrison@cellularoneaz.com

Financial Data Summary (3027) Revenue	(3028) Operating Expenses	(3029) Net Income	(3030) Telephone Plant In Service(TPIS)	(3031) Total Assets	(3032) Total Debt	(3033) Total Equity	(3034) Dividends	

Name of Attached Document Listing Required Informa

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
---	--	--

<010>	Study Area Code	459001
<015>	Study Area Name	SRITH HAGLEY, INC CL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Anità Gattison
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 9285370690 ext 2506
<039>	Contact Email Address - Email Address of person identified in data l	ine <030> agarrisonscellularoneaz com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions - FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	
Broadband Deployment Locations – FCC 14-98 (par	agraph 80)	
4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	
4004b, Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband	Name of Attached Document Listing Required Information	

	tion - Reporting Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001
<015>	Study Area Name	SMITH BAGLEY, INC CL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Anita Garrison
<035>	Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext.2506
<039>	Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularoneaz.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of	of the Data Reported for the Annual Reporting for CAF or LI Recipients
I certify that I am an officer of the reporting carrier; my responsibilities inclurecipients; and, to the best of my knowledge, the information reported on t	de ensuring the accuracy of the annual reporting requirements for universal service support his form and in any attachments is accurate.
Name of Reporting Carrier: SMITH BAGLEY, INC CL	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/29/2016
Printed name of Authorized Officer: Justin hinkle	
Title or position of Authorized Officer: CEO	
Telephone number of Authorized Officer: 9282053508 ext.	
Study Area Code of Reporting Carrier: 459001	Filing Due Date for this form: 07/01/2016
, ,	ne or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment of the United States Code, 18 U.S.C. § 1001.

	tion - Agent / Carrier lection Form	Yana me	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	459001	
<015>	Study Area Name	SMITH BAGLEY, INC CI	4
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Anita Garrison	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext.2506	
<039>	Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularonea	z.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

	is authorized to submit the information reported on behalf of the reporting carrier. nsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ovided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can b	shed by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment er Title 18 of the United States Code, 18 U.S.C. § 1001

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Autho	rized to File Annual Reports for CAF or LI Reci	pients on Behalf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am authorized the data reported herein based on data provided by the reporti		ort recipients on behalf of the reporting carrier; I have provided mation reported herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date: 06/29/2016
Name of Authorized Agent Employee:		
litle or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of Agent:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
		t of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title

Attachments

LINE 200 - SERVICE OUTAGE REPORTING (VOICE)

REDACTED FOR PUBLIC INSPECTION

[This attachment is withheld in its entirety pursuant to the company's request for confidential treatment.]

<u>Line 510 - Compliance with Service Quality Standards and</u> Consumer Protection

Smith Bagley, Inc. ("SBI") hereby certifies that it has reviewed its service quality and consumer protection practices, which it follows in connection with its provision of voice and broadband services, and that these practices ensure that SBI:

- (1) Discloses rates and terms of its voice and broadband services to customers.
- (2) Makes available maps showing where voice and broadband services are generally available.
- (3) Provides contract terms to customers and confirms changes in voice or broadband service.
- (4) Allows a trial period for new voice or broadband service.
- (5) Provides specific disclosures in advertising.
- (6) Separately identifies carrier charges from taxes on billing statements.
- (7) Provides customers the right to terminate voice or broadband service for changes to contract terms.
- (8) Provides ready access to customer service.
- (9) Promptly responds to consumer inquiries and complaints received from government agencies.
- (10) Abides by policies for protection of consumer privacy.
- (11) Provides consumers with free notifications for voice, data and messaging usage, and international roaming.

(12) Abides by standards regarding the ability of customers, former customers, and individual owners of eligible devices to unlock phones and tablets that are locked by or at the direction of SBI.

These service quality and consumer protection practice categories are the same as those included in the CTIA-The Wireless Association® ("CTIA") Consumer Code for Wireless Service ("CTIA Code" or "Code") as currently in effect.

LINE 610 – FUNCTIONALITY IN EMERGENCY SITUATIONS

REDACTED FOR PUBLIC INSPECTION

[This attachment is withheld in its entirety pursuant to the company's request for confidential treatment.]

		4					h	July 2013	
<010> Study	Study Area Code				459001				
<015> Study	Study Area Name				SMITH BAGLEY,	EY, INC CL			
<020> Progr	Program Year				2017				
<030> Cont	act Name - P	Contact Name - Person USAC should contact regarding this data	Contact regar	Jing this data	Anita Garrison	ison			
<035> Cont	act Telephor	e Number - Numbe	er of person id	Contact Telephone Number - Number of person identified in data line <030>	<030> 9285370690 ext.2506	ext.2506		_	
<039> Cont	act Email Ad	dress - Email Addre	ss of person id	Contact Email Address - Email Address of person identified in data line <030>	Ш	agarrison@cellularoneaz.com			
<701> Resid <702> Singl <703>	dential Local e State-wide	Residential Local Service Charge Effective Date Single State-wide Residential Local Service Charge	ective Date ervice Charge	-	1/2016				
	<a1></a1>	<a2></a2>	<a3></a3>	 b1>	<97>	<93>	<94>	465	ŷ
"	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
MM	4.5	499001		FR	9,25	0 0	0 * 0	0*0	9.25
MN	45	499001		FR	34,25	0.50	0*0	0.0	34.25
Ц									

(800) Operating Companies Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
<010> Study Area Code	459001	
<015> Study Area Name	SMITH BAGLEY, INC CL	
<020> Program Year	1	
<030> Contact Name - Person USAC should contact regarding this data	Anita Garrison	
<035> Contact Telephone Number - Number of person identified in data line <030>	9285370690 ext.2506	
<039> Contact Email Address - Email Address of person identified in data line <030>	agarrison@cellularoneaz.com	
<810> Reporting Carrier Smith Bagley, Inc		
<811> Holding Company Smith Bagley, Inc.		
<813>	<a>>	<83>
Affiliates	SAC	Doing Business As Company or Brand Designation
Smith Baqley, Inc	459001	Cellular One
Badlev.	459002	
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	- R	

LINE 920 - TRIBAL ENGAGEMENT NARRATIVE

REDACTED FOR PUBLIC INSPECTION

[This attachment is withheld in its entirety pursuant to the company's request for confidential treatment.]

Smith Bagley, Inc. Line 1200 - Terms and Conditions for Lifeline Customers

VisionOne (available on Tribal lands) –Introduced 5/4/2015

Monthly Charge: \$0.50

Number of included minutes: 600 Local Minutes with 50MB Data

Per-Minute rates:

Long Distance:

.25/minute

Roaming:

.35/minute (includes toll)

Additional local minutes:

.20/minute

Free4Life (available on Tribal lands) - Introduced 12/1/2015

Monthly Charge: \$0.50

Number of included minutes: Unlimited Nationwide Talk, Text, Picture Messaging and 500 MB Data

FreedomFone (available on non-Tribal lands) – Introduced 5/4/2015

Monthly Charge: \$0.50

Number of included minutes: 300 Any Network Minutes and 1000 Text Messages

Per-Minute rates:

Long Distance:

.25/minute

Roaming:

.35/minute (includes toll)

Additional local minutes:

.20/minute